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AMENDMENTS TO THE CLAIMS

This listing will replace all prior versions, and listings, of claims in the application:

- 1. (currently amended) A method for reducing the pain associated with penetration of the skin of a patient at a site with a needle or surgical instrument, comprising providing a pressure member having a skin engaging surface that is relatively broad in relation to the thickness of the pressure member, urging [[a]] the skin engaging surface of [[a]] the pressure member against the skin of a patient proximate the site, to thereby depress the skin with sufficient force to stimulate the large diameter afferent sensory nerve fibers in the skin proximate the site and at least partially block pain signals from the small diameter afferent pain nerve fibers in the skin proximate the site.
- 2. (original) The method of claim 1, wherein the skin engaging surface of the pressure member is urged against the skin proximate the site shortly prior to or at the same time as that the needle or surgical instrument contacts the skin at the site.
- 3. (previously amended) The method of claim 1, wherein the pressure member is comprised of a material that is flexible enough to substantially conform to the contours of the skin in the vicinity of the site as the pressure member is urged against the skin.
- 4. (original) The method of claim 1, wherein the pressure member is comprised of a flexible, polymeric material.

- 5. (original) The method of claim 1, wherein the pressure member is comprised of a rigid material.
- 6. (original) The method of claim 5, wherein the pressure member is comprised of metal.
- 7. (original) The method of claim 1, wherein the skin engaging surface of the pressure member extends about an aperture formed in the pressure member, and the needle or surgical instrument is introduced through the aperture to contact the skin at the site.
- 8. (original) The method of claim 1, wherein the skin engaging surface is comprised of a plurality of projections extending from said pressure member.
- 9. (original) The method of claim 8, wherein the ends of the projections are blunt relative to the end of the needle or surgical instrument being employed.
- 10. (original) The method of claim 1, wherein the perimeter of the pressure member is formed with at least one noncircular section to facilitate handling of the pressure member.
- 11. (original) The method of claim 10, wherein the perimeter of the pressure member defines a generally cloverleaf shape.

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12. (original) The method of claim 1, wherein when the skin engaging surface of the pressure member is urged against the skin proximate the site, the skin engaging surface substantially conforms to the contours of the skin proximate the site.

13-27 (canceled).

- 28. (currently amended) A method for reducing the pain associated with penetration of the skin of a patient at a site on the skin with a needle or surgical instrument, comprising providing a pressure member having a skin engaging surface that is relatively broad in relation to the thickness of the pressure member, urging [[a]] the skin engaging surface of [[a]] the pressure member against the skin of the patient proximate the site, the skin engaging surface being comprised of a plurality of projections extending from the pressure member, to thereby depress the skin with sufficient force to stimulate the large diameter afferent sensory nerve fibers in the skin proximate the site and at least partially block pain signals from the small diameter afferent pain nerve fibers in the skin proximate the site.
- 29. (original) The method of claim 28, wherein the skin engaging surface of the pressure member extends about an aperture formed in the pressure member, and the needle or surgical instrument is introduced through the aperture to contact the skin at the site.
- 30. (original) The method of claim 28, wherein the ends of the projections are blunt relative to the end of the needle or surgical instrument being employed.

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31-53 (canceled).